The State of New Hampshire

	COUNTY	PROBATE COURT	
	IN RE: <u>Name change of</u>		
	DOCKET NUMBER:		
PETITION FOR CHANGE OF NAME FOR ADULT MINOR			
1.	Petitioner Name	Telephone	
	Mailing Address		
2.	Minor Name	Telephone	
	Mailing Address		
	Relationship of petitioner to minor		
3.	Attorney Name	Telephone	
	Mailing Address	•	
- 11	PLEASE COMPLETE THE FOLLOWING INFORMATION WHOSE NAME IS BEING CHANGED.	AS IT APPLIES TO THE PERSON	
4.	Town of residence		
5.	Date of birth Place of birth		
6.	If minor, name of mother		
	Mailing Address		
7.	If minor, name of father		
	Mailing Address		
8.	Check the following paragraphs that apply to the person whose name is being changed. I am a person who is serving a prison sentence, or who is on probation or parole, and I certify that I have sent a copy of this petition to the department of corrections as required by law. I understand that failure to comply with notification requirements shall cause any decree hereunder to be null and void. I am a person who is required to register as a sexual offender or an offender against children pursuant to RSA 651-B, and I certify that I have sent a copy of this petition to the department of safety or other agency as required by law. I understand that failure to comply with notification requirements shall cause any decree hereunder to be null and void.		

Neither of the above paragraphs are applicable to this name change.

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In Re:	
The petitioner requests that the name	be changed
(F	First, middle and last names)
to	in accordance with the laws of the State of
(First, middle and last names)	
New Hampshire and for the following reasons	s:
Date:	
	Petitioner Signature
•	ertified copy of birth certificate must accompany
this petition. If change is for an adult, proof of	of identity must accompany this petition.
0	RDER
The above petitioner has sworn before the jud	dgo that the facts are true to his/her host
knowledge and belief. Accordingly, the court	
☐ Petition is granted.	
La l'etition is granted.	
☐ Petition is denied.	
Date:	
	Judae